## PART B - FEE(S) TRANSMITTAL Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

MAR 17 2008	•	P. A or <u>Fax</u> (5	ommissioner for Pa O. Box 1450 lexandria, Virginia 71)-273-2885	22313-1450	
INSTRUCTIONS: This forms hould be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. Alternative properties of the current correspondence address as indicated unless considerate below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.					
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)			Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
23973 7590	12/21/2007	•	Certific	ate of Mailing or Trans	mission
DRINKER BIDDLE & REATH ATTN: INTELLECTUAL PROPERTY GROUP ONE LOGAN SQUARE			I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
18TH AND CHERRY STREETS PHILADELPHIA, PA 19103-6996			Mariana Lennox (Depositor's name)		
THEADER IIII, THE ISSUES			Mariana (Signature)		
			March 13	, 2008/	(Date)
APPLICATION NO. FILING D	DATE	FIRST NAMED INVENTO	OR AT	TORNEY DOCKET NO.	CONFIRMATION NO.
		ohn Andrew Murray McC	McGrath 08830-0368US1 6564		
TITLE OF INVENTION: METHOD AND	APPARATUS FOR THE DIA	GNOSIS OF GLAUCON	AA AND OTHER VISU	AL DISORDERS	
APPLN. TYPE SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	E PREV. PAID ISSUE FI		
nonprovisional YES	\$720	\$300	\$0	\$1020	03/21/2008
EXAMINER	ART UNIT	CLASS-SUBCLASS	03/18/2008 EHYRL	EN2 00000017 30v373	10_335 <u>5</u> 5
GREECE, JAMES R 2873		351-209000	<del></del>	700-00-04 300-00-04	
1. Change of correspondence address or ind CFR 1.363).  Change of correspondence address (of Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" (or "Fee Address") indication (or "Fee Address") rev 03-02 or more recent) Number is required.	2. For printing on the patent from the gent from the gent from the patent attorneys 1  (1) the names of up to 3 registered patent attorneys 1  (2) the name of a single firm (having as a member a registered attorney or agent) and the name of a registered attorney or agent) and the name is 2  2 registered patent attorneys or agents 15,00 name is 3 (0,00 fb) listed, no name will be printed 3 FC:8001				
3. ASSIGNEE NAME AND RESIDENCE	DATA TO BE PRINTED ON	THE PATENT (print or	type)		
PLEASE NOTE: Unless an assignee is recordation as set forth in 37 CFR 3.11.  (A) NAME OF ASSIGNEE  Please check the appropriate assignee category	identified below, no assigned Completion of this form is NO	e data will appear on the DT a substitute for filing (B) RESIDENCE: (CI	e patent. If an assignee an assignment. TY and STATE OR CO	JNTRY)	document has been filed for roup entity  Government
Please check the appropriate assignee categ					
4a. The following fee(s) are submitted:		previously paid issue fe	e shown above)		
Issue Fee  Publication Fee (No small entity disc	A check is enclose  Payment by credit	edit card. Form PTO-2038 is attached.			
Advance Order - # of Copies 5		The Director is her overpayment, to D	or is hereby authorized to charge the required fee(s), any deficiency, or credit any ent, to Deposit Account Number 50-0573 (enclose an extra copy of this form).		
5. Change in Entity Status (from status in   a. Applicant claims SMALL ENTIT	V status, See 37 CFR 1.27.	☐ b. Applicant is no	longer claiming SMALL	ENTITY status. See 37	CFR 1.27(g)(2).
NOTE: The Issue Fee and Publication Fee interest as shown by the records of the Uni	(if required will not be accept	ted from anyone other th	an the applicant; a registe	ered attorney or agent; or	the assignee or other party in
	Allinnes.		Date Mc	erch 13 -	2008
Authorized Signature  T 1 D 1 D 200 D 30 469					
Typed of printed name					
This collection of information is required by 37 CFR 1.31. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process an application. Confidentiality is governed by 35 U.S.C. 121 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, proparing, and submitting the completed application form to the USPTO Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450 Alexandria, Virginia 22313-1450.  Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.					
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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re: Patent application of Attorney Docket No.:

John Andrew Murray McGrath et al.

36290-0368-00-US (217240)

Serial No.:

10/553,859

Group Art Unit: 2873

Filed:

December 6, 2005

Confirmation No.: 6564

Examiner:

For:

Method and Apparatus for the

Diagnosis of glaucoma and Other

Visual Disorders

Greece, James R.

Mail Stop Issue Fee Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

## PAYMENT OF ISSUE FEE

Sir:

In response to the Notice of Allowance and Issue Fee Due dated December 21, 2007, the response to which is due March 21, 2008, applicant timely submits the completed PTOL-85B form.

## CERTIFICATE OF MAILING UNDER 37 C.F.R. 1.8(a)

I hereby certify that this paper, along with any paper referred to as being attached or enclosed, is being deposited with the United States Postal Service on the date indicated below, with sufficient postage, as first class mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450/Alexandria,

VA 22313-1450.

Mariana Lennox

DATE: March 13, 2008

A check in the amount of \$1,035.00 is enclosed for payment of the issue fee and five (5) advance copies of the issued patent. Please charge **Deposit Account No. 50-0573** for any additional fee required or to credit any overcharge to the same deposit account.

Respectfully submitted,

JOHN ANDREW MURRAY MCGRATH ET AL.

BY:

REGORY J. LAVORGNA

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